PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006				Complete if Known				
						09/813,115-Conf. #8101		
						March 21, 2001		
						FAHRAEUS, Christer H. Song		
Applicant claims	small ontity status	San 27 CED 1 27	<u> </u>					
Applicant claims small entity status. See 37 CFR 1.27				70.07.11		2135		
TOTAL AMOUNT OF PAYMENT (\$) 120.00				Attomey Docket No. 3782-0113P				
METHOD OF PAY	MENT (check all t	hat apply)						
x Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayment of x Credit any overpayments								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEA				<u></u>				
	FILIN	G FEES		HFEES	EXAMIN.	ATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$) Fo	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300		500	250	200	100		<u> 147</u>
Design	200		100	50	130	65		
Plant	200		300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE	ES							Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (ii	•						50	25
Each independent clai	•	ng Reissues)					200	100
Multiple dependent cl							360	180
		ee (\$)I	Fee Paid (\$)			Itiple Depende		
70 - = HP = highest number of to	0 x	reater than 20			Fee	<u>: (\$)</u>	Fee Paid (\$)	Į
•			Fee Paid	(\$)				_
6 -=	0 ×	=		<u> </u>				
HP = highest number of in	dependent claims paid	for, if greater than 3.						
		application size fe	ee due is	\$250 (\$125 f				ı
Total Sheets	Extra Sheets			onal 50 or frac			Fee F	Paid (\$)
- 100 = /50 (round up to a whole number) x						·	=	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)								
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00								
SUBMITTED BY			uelle					
Signature Politic	n. Coud	le leg 10.46	Posi	istration No. mey/Agent)	29,680	Telephone	(703) 205	
Name (Print/Type) Mich	ael Mutter	4 LEY NO. 70,	Kn.11 (vijo	meyregent)	· ·	Date	August 18	

MKM/JAV/jen

PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)								
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	3782-0113P								
Application Number 09/813,115-Conf. #8101	Filed M	March 21, 2001							
	<u> </u>								
For SECURED ACCESS USING A COORDINATE SYSTEM									
Art Unit 2135	Examiner	H. Song							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows (check time period des	ired and enter the ap	propriate fee below):							
F <u>ee</u>	Small Entity Fee								
X One month (37 CFR 1.17(a)(1)) \$120	\$60	\$ 120.00							
Two months (37 CFR 1.17(a)(2)) \$450	\$225	_ \$							
Three months (37 CFR 1.17(a)(3)) \$1020	\$510	\$							
Four months (37 CFR 1.17(a)(4)) \$1590	\$795	\$							
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	<u>\$</u>							
Applicant claims small entity status. See 37 CFR 1.27.									
X A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
The Director has already been authorized to charge fees in this application to a Deposit Account.									
X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to									
Deposit Account Number02-2448 I have enclosed a duplicate copy of this sheet.									
I am the applicant/inventor.									
assignee of record of the entire interest. See 37 CFR 3.71.									
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
attorney or agent of record. Registration Numbe	r	 _							
attorney or agent under 37 CFR 1.34.									
Registration number if acting under 37 CFR 1,34	29,680	·							
- Tennylandy Neg. No. 4/e, 607		t 18, 2006							
Signature		Date							
Michael K. Mutter Typed or printed name		205-8000							
Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more									
than one signature is required, see below.									
Total of forms are submitted.									

08/21/2006 SDENBOB1 00000052 09813115 120.00 OP 01 FC:1251